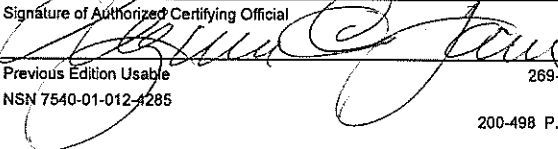


REVISED

FINANCIAL STATUS REPORT
(Long Form)

(Follow instructions on the back)

1. Federal Agency and Organizational Element to Which Report is Submitted GENERAL SERVICES ADMIN		2. Federal Grant or Other Identifying Number Assigned By Federal Agency HELP AMERICA VOTE ACT (HAVA I FUNDING)		OMB Approval No. 0348-0039	Page of 1 1 pages
3. Recipient Organization (Name and complete address, including ZIP code) STATE OF DELAWARE; COMMISSIONER OF ELECTIONS; 111 S WEST ST DOVER, DE 19904					
4. Employer Identification Number 51-6000279		5. Recipient Account Number or Identifying Number SA 03 09 17 02		6. Final Report <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
7. Basis <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Accrual					
8. Funding/Grant Period (See instructions) From: (Month, Day, Year) 5/9/2003		To: (Month, Day, Year)		9. Period Covered by this Report From: (Month, Day, Year) 1/1/2005	
				To: (Month, Day, Year) 12/31/2005	
10. Transactions:					
		I Previously Reported		I This Period	
				III Cumulative	
a. Total outlays		746,444.94		1,045,936.12	
b. Refunds, rebates, etc.				1,792,381.06	
c. Program income used in accordance with the deduction alternative				0.00	
d. Net outlays (Line a, less the sum of lines b and c)		746,444.94		1,045,936.12	
				1,792,381.06	
Recipient's share of net outlays, consisting of:					
e. Third party (in-kind) contributions				0.00	
f. Other Federal awards authorized to be used to match this award				0.00	
g. Program income used in accordance with the matching or cost sharing alternative				0.00	
h. All other recipient outlays not shown on lines e, f or g				0.00	
i. Total recipient share of net outlays (Sum of lines e, f, g and h)		0.00		0.00	
				0.00	
j. Federal share of net outlays (line d less line i)		746,444.94		1,045,936.12	
				1,792,381.06	
k. Total unliquidated obligations				483,809.44	
l. Recipient's share of unliquidated obligations					
m. Federal share of unliquidated obligations				483,809.44	
n. Total Federal share (sum of lines j and m)				2,276,190.50	
o. Total Federal funds authorized for this funding period				5,223,898.00	
p. Unobligated balance of Federal funds (Line o minus line n)				2,947,707.50	
Program income, consisting of:					
q. Disbursed program income shown on lines c and/or g above					
r. Disbursed program income using the addition alternative					
s. Undisbursed program income					
t. Total program income realized (Sum of lines q, r and s)				0.00	
11. Indirect Expense					
a. Type of Rate (Place "X" in appropriate box) <input checked="" type="checkbox"/> Provisional <input type="checkbox"/> Predetermined <input type="checkbox"/> Final <input type="checkbox"/> Fixed					
b. Rate		c. Base		d. Total Amount	
				e. Federal Share	
12. Remarks: Attach any explanations deemed necessary or information required by Federal sponsoring agency in compliance with governing legislation. FEDERAL GRANT 5,000,000.00 INTEREST ON FUNDS POSTED AS OF DECEMBER 31, 2005 - \$223,898.00					
13. Certification: I certify to the best of my knowledge and belief that this report is correct and complete and that all outlays and unliquidated obligations are for the purposes set forth in the award documents.					
Typed or Printed Name and Title VIRGINIA E LANE; SUPPORT SERVICES ADMINISTRATOR				Telephone (Area code, number and extension) 1-302-739-4277	
Signature of Authorized Certifying Official 				Date Report Submitted January 25, 2007 AMENDED	

Previous Edition Usable
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269-104

200-498 P.O. 139 (Face)

Standard Form 269 (Rev. 7-97)
Prescribed by OMB Circulars A-102 and A-110

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